



DEPARTMENT OF THE NAVY
COMMANDER NAVAL AIR FORCE
UNITED STATES PACIFIC FLEET
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SAN DIEGO, CALIFORNIA 92135-7051

Canc frp: Nov 02

COMNAVAIRPACNOTE 1320

N01F

NOV 20 2001

COMNAVAIRPAC NOTICE 1320

Subj: TEMPORARY ADDITIONAL DUTY (TAD) AND TRAVEL REQUEST
PROCEDURES FOR COMNAVAIRPAC STAFF PERSONNEL

Ref: (a) Navy Travel Regulations
(b) Joint Federal Travel Regulations, Volume 1
(c) Joint Travel Regulations, Volume 2
(d) DoD Financial Management Regulations, Volume 9
(e) DoN, Office of the Assistant Secretary (Financial
Management and Comptroller) Memorandum
dated 10 Aug 01
(f) Public Law 105-264
(g) ATOSPlus Traveler User's Guide

Encl (1) TAD and Travel Request Procedures
(2) DD 1351-2 Preparation Guide

1. Purpose. To promulgate procedures for the administration of TAD orders and travel authorizations by Staff personnel of Commander, Naval Air Force, U.S. Pacific Fleet; to delineate procedures for requesting travel authorizations and TAD orders; and to provide guidance in handling unusual situations involving TAD orders.

2. Action. Effective and efficient administration of travel procedures requires thorough understanding and compliance by all COMNAVAIRPAC Staff personnel of the policies and guidance contained in this instruction.

3. References

a. Reference (a) is a joint publication of the Naval Military Personnel Command, the Comptroller of the Navy, and Headquarters, U.S. Marine Corps. Reference (a) amplifies and interprets for Navy and Marine Corps use, the travel regulations issued by reference (b), which contains basic statutory regulations concerning travel and transportation allowances of members of all branches of the uniformed services.

b. Reference (c) contains basic statutory regulations concerning travel and transportation allowances of civilian personnel.

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c. Reference (d) provides supplemental instructions on the payment of allowances authorized in references (b) and (c), and the requirement for reporting travel expenses.

d. Reference (e) is the implementation of changes to Department of Defense Travel Card policies to reduce delinquency rates.

e. Reference (f) is the Travel and Transportation Reform Act of 1998.

f. Reference (g) provides guidance on how to use the ATOSPlus Traveler, which allows the automation of TAD/TDY travel planning, approval, and liquidation.

4. Cancellation contingency. Upon receipt of the next COMNAVAIRPACNOTE 1320 with same subject.


M. L. PURCELL
Chief of Staff

Distribution:
Staff Full Internal

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TAD AND TRAVEL REQUEST PROCEDURES1. RESPONSIBILITIESa. TRAVELER

(1) Utilize ATOSPlus Traveler to submit a Trip Request. ATOSPlus Traveler is an electronic audit trail and assists in the management of TAD funds. The Travel Office WILL NOT accept any paper Trip Requests.

(2) Submit Trip Request as soon as travel dates are known, and if possible, not later than 10 working days prior to requested departure date.

(3) Ensure the Routing Chain has taken action on the Trip Request within three (3) days from the date of submission.

(4) Notify the Travel Office if any person in the Routing Chain is unavailable to take action on the Trip Request to allow timely processing of Travel Orders. (It is ultimately the traveler's responsibility to ensure that the Trip Request is processed on time.)

(5) The traveler or the Code Travel Coordinator is responsible for making all flights, lodging, and rental car reservations through SATO. All reservations shall be made under the name that reflects on the traveler's I.D. card.

(6) Notify the Travel Office immediately regarding any changes in travel plans.

(7) Inform the respective Code Travel Coordinator of any last minute travel requirement.

(8) Collect all receipts for expenses of \$75.00 or higher, AND all receipts for lodging, rental car & conference fees regardless of amount.

(9) Submit Travel Claims no later than five (5) working days upon completion of travel in accordance with reference (d) Failure to submit a travel claim may prevent subsequent travel.

(10) Forward completed travel claims (including all required receipts and a copy of original orders) to the Travel Office for review and compliance.

Enclosure (1)

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(11) Provide a copy of the Flight Itinerary to the Travel Office when submitting travel claims.

(12) Notify the Travel Coordinator of any cancelled and/or re-scheduled travel as soon as possible. Cancel any flight reservations.

(13) Return original orders and airline tickets to the Travel Office on any cancelled travel.

b. CODE TRAVEL COORDINATOR

(1) Ensure all assigned personnel are entered in the ATOSPlus Traveler (whether or not they will be travelling in the near future).

(2) Ensure all Trip Requests are being processed by all concerned in a timely manner.

(3) Ensure the traveler is in possession of a Travel Card

(4) Check the status of Trip Requests with the Travel Office no later than three (3) working days prior to traveler's departure date.

(5) Notify the Travel Office of any "last minute" travel requirements (including changes to any previous travel requests) as soon as known.

(6) Make arrangements to obtain airline tickets (through SATO), lodging and rental car (if required). Ensure all arrangements are made using the traveler's full name as shown on their I.D. cards.

(7) Ensure Travel Claims are submitted within five (5) working days of traveler's return from travel and review for compliance.

(8) Notify the Travel Office of any cancelled and/or re-scheduled travel as soon as possible. Cancel any flight, lodging, and rental car reservations. Return original orders and airline tickets to the Travel Office immediately.

(9) Cancel any outstanding Trip Request in ATOSPlus Traveler for cancelled travel requirement in order to maintain a proper balance of funds in the ATOSPlus Traveler Checkbook.

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(10) Compare the Traveler Checkbook and the ATOS Divisional Obligations & Settlement Report regularly.

(11) Pick up copy of settlement documents from the Travel Office on a weekly basis and give to the traveler.

Note: Each Office Code will provide the Travel Office with the names of each Code Travel Coordinators. The Code Travel Coordinator will be the first stop in the Routing Chain.

c CODE TAD BUDGET MANAGER

(1) Ensure TAD Funds are available prior to endorsing a request for travel.

(2) Submit budget request for the following year's travels to the Budget Office 30 days prior to the end of the Fiscal Year.

d APPROVING OFFICIAL (Code Approval)

(1) Ensure all Trip Requests are approved and forwarded to the Travel Office.

Note: The Code Approving Official will be the last person in the Routing Chain before the Travel Office.

e. TRAVEL OFFICE

(1) Prepare travel orders in accordance with the Trip Request as approved by the Code Approving Official.

(2) Pick up airline tickets from SATO. Late travel requests may require the traveler or Code Travel Coordinator to provide assistance in picking up the airline tickets.

(3) Review all travel claims for compliance with reference (d). (Note: The Travel Office Authorizing Official is the ONLY official authorized to approve/disapprove and sign all travel claims.)

(4) Provide the ACOS with a list of delinquent travel claims monthly. Any travel claim received more than five (5) working days after completion of travel is considered delinquent.

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(5) Provide a monthly budget summary report to each Code Travel Coordinator/Code TAD Budget Manager to assist in validating their checkbooks.

(6) Provide assistance, as needed, in preparing DD Form 1351-2 (Travel Voucher or Subvoucher).

(7) Pick up settlement documents from PSD North Island and provide a copy to the Code Travel Coordinators.

(8) Retain a copy of all travel orders and settlement documents for a period of two (2) years.

(9) Serve as the Agency Program Coordinator (APC) for the Staff Government Travel Card Program.

f. BUDGET OFFICE

(1) Provide an annual budget to each office code for the purpose of TAD Travel.

(2) Furnish the Travel Office with a copy of the codes' travel budget.

(3) Conduct a mid-year and end-of FY TAD budget validation of each office code.

(4) Receive and review any request for budget augmentation and approve as necessary.

(5) Recoup and redistribute any unused TAD funds, as needed.

g. OUT CONUS EMERGENCY LEAVE (Military and Family Members only) Staff Admin (N004B) shall

(1) Notify the Travel Office of any OCONUS Emergency Leave requirement.

(2) Submit Trip Request for the service member using ATOSPlus Traveler.

(3) Assist the service member and/or his or her family members in making travel reservations.

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2. TRAVEL CLAIMS

a. COMPLETION. The traveler is responsible for preparing his or her DD Form 1351-2 to claim reimbursement for official travel in accordance with enclosure (1). Even when someone else prepares the voucher, the traveler is responsible for the truth and accuracy of the information. When the traveler signs the form (and this signature authority must never be delegated), he or she attests that the statements are true and complete and that he or she is aware of the liability for filing a false claim. All claims and attached statements shall be completed using ink, typewriter, or computer-generated forms.

b. ERASURES AND ALTERATIONS. The traveler shall initial erasures and alterations in totals on reimbursement vouchers. Erasures and alterations in the totals on receipts shall be initialed by the person who signed the receipt.

c. LEAVE OF ABSENCE. When leave of absence of any kind is taken while in a travel status or at TDY point(s), the number of hours, type of leave and dates for employees or dates for members shall be shown in the reimbursement voucher along with the scheduled hours of duty if a leave of absence is taken.

d. RETURN TO PERMANENT STATION OR HOME ON NON-WORKDAYS. If return to the PDS or home from which the traveler commutes daily to the PDS is made over a weekend or on any non-workday, the following information shall be entered on the voucher:

Date of arrival at PDS (or home)

(2) Round trip ticket cost or round trip distance traveled by privately owned conveyance (POC)

Date of return to TDY location

Per diem is not payable for time spent at the PDS or home. A mileage allowance is not payable for POC travel if the traveler traveled with another employee or uniformed member unless the traveler was responsible for paying the POC operating expenses.

e. SUPPORTING DOCUMENTS. In addition to expense statements or other declarations, when required, the voucher shall be supported by the documents described below.

(1) Travel Orders. One copy of the travel orders and issued amendments shall be attached to the voucher for TDY travels.

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(2) Receipts. Paid expense receipts of \$75.00 or more AND all receipts for lodging, rental car, and conference fees regardless of the amount.

(3) Unused Tickets. When itineraries are changed or trips are canceled after tickets have been issued to the traveler, a statement shall be entered on the travel voucher and initialed by the traveler, that all tickets either have been used for official purposes and/or all unused tickets, or portions thereof, have been properly accounted for, and turned in to the Travel Office.

(4) Actual Expense Authorization (AEA). When an AEA has been authorized or approved in connection with TDY and not documented on the travel order, three copies of the AEA shall be attached to the voucher.

f. REIMBURSABLE EXPENSES. The traveler shall enter all allowable reimbursable expenses. Tax on lodging is a separate reimbursable expense and shall be listed separately for travel within the CONUS and OCONUS non-foreign areas.

g. ITEMS REQUIRING ADVANCE AUTHORIZATION. The following require advance authorization and may not be approved on the voucher after the fact:

(1) Use of reduced fares for group or charter arrangements.

(2) Payment of a reduced rate of per diem for subsistence expenses.

(3) Acceptance of payment from a non-Federal source for travel expenses.

(4) Travel expenses related to attendance at a conference

(5) Travel expenses resulting in additional costs to the government (i.e. rental car upgrade, change in mode of travel from commercial air to commercial/private auto, etc.)

h. DD FORM 1351-2. Enclosure (2) provides block-by-block instructions on entries required on DD Form 1351-2 (Aug 97).

i. CIVILIAN TRAVELS. Compensation may be authorized for travels performed on non-workdays if prior approval is obtained from the supervisor.

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j. ELECTRONIC FUND TRANSFER (EFT). Electronic Fund Transfer is the preferred method of reimbursement. Travelers must have an up-to-date EFT record on file when submitting a travel claim. The EFT form must be attached if submitting a travel claim for the first time or updating the EFT record on file.

k. DEFAULT SPLIT DISBURSEMENT OPTION (Split Pay): Under the split disbursement option, a traveler may elect to have some portion of their travel payment paid directly to their travel charge card account.

(1) Per reference (e), unless otherwise indicated on the travel claim, any charges for transportation, lodging and rental card will be sent to the traveler's charge card account and the remainder to the traveler's designated financial institution account.

l. APPROVING OFFICER SIGNATURE (Block 21a of DD Form 1351-2 dtd Aug 97). Only the Staff Travel Office Approving Official is authorized to sign this block and NOT the Code Approving Official.

m. TRAVEL CLAIM INQUIRY. Travel Claim Inquiry is a web-based tool provided by PSA West Network that allows the traveler to check the status of submitted travel claims.

The address is: <http://www.psasd.navy.mil>

Please allow 10 working days after turning in your travel claims before making an inquiry.

3. DOD TRAVEL CARDS. It is the general policy of DoD that the Government-sponsored, contractor-issued travel card be used by DoD personnel to pay for all costs incidental to official business travel, including travel advances, lodging, transportation, rental cars, meals and other incidental expenses, unless otherwise specified.

a. RESTRICTIONS. The DOD Travel Cards are to be used for official travel and official travel related expenses only. It is NOT to be used for personal expenses not related to the official performance of assigned duties and other personal expenses locally (i.e. gas for POV, K-mart, Ticketmaster, etc.), or when not on official travel.

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b. CHECK-IN/CHECK-OUT. All CNAP civilian and military personnel are required to check-in/check-out with the Travel Office when reporting for duty or detaching from CNAP for Travel Card account validation, transfer, and/or termination.

c. USEAGE LIMIT. Any increase to usage limit must be requested from the Travel Office.

(1) Normal Working Hours: (619) 545-2745/2746 or DSN 735-2745/2746

(2) After Hours: Call the Duty Office at (619) 545-2017 or DSN 735-2017. The Duty Office will contact the Staff APC to obtain authorization.

d. DELINQUENCY NOTIFICATION. Reference (d) requires the notification of supervisors and Commanders (COS/ACOS) when a cardholder's account approaches the 60-day past due date. The Staff APC is to also notify the cardholders whenever they inform Commanders and supervisors that a cardholder is delinquent in the payment of outstanding bills.

e. SALARY OFFSETS. Reference (f), the Travel and Transportation Reform Act, permits the salary offset of undisputed delinquent amounts that are due to the travel card contractor. Under this program, the contractor may request DoD to collect amounts that are 90 or more days past billing.

4 POINTS-OF-CONTACT

a. TRIP REQUESTS/TRAVEL ORDERS

(1) Travel Office

- (a) Ms. Sonja Arcelona - (619) 545-2745
email: arcelona.sonja.d.@cnap.navy.mil
- (b) Mr. Chevance Bailey - (619) 545-2746
email: bailey.chevance.b@cnap.navy.mil
- (c) PNC(SW) Ron Rodolfo - (619) 545-2746
email: rodolfo.ron@cnap.navy.mil

b. TRAVEL CLAIMS

(1) Travel Office

- (a) Ms. Sonja Arcelona - (619) 545-2745
email: arcelona.sonja.d.@cnap.navy.mil
- (b) Mr. Chevance Bailey - (619) 545-2746
email: bailey.chevance.b@cnap.navy.mil
- (c) PNC(SW) Ron Rodolfo - (619) 545-2746

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email: rodolfo.ron@cnap.navy.mil
Travel Claim Inquiry Web Site:
http://www.pasasd.navy.mil

c. GOVERNMENT TRAVEL CARD

(1) Agency Program Coordinator

- (a) PNC(SW) Ron Rodolfo - (619) 545-2746
email: rodolfo.ron@cnap.navy.mil
- (b) Mr. Ed McCoy - (619) 545-2764
email: mccoy.elbert.1@cnap.navy.mil

d. BUDGET INQUIRY

(1) Budget Office

- (a) Ms. Linda Leon - (619) 545-2739
email: leon.linda.j@cnap.navy.mil
- (b) LCDR Southerland - (619) 545-1031
email: southerland.gary.w@cnap.navy.mil

e. AIRLINE/LODGING/RENTAL CAR RESERVATIONS

(1) SATO/CTO

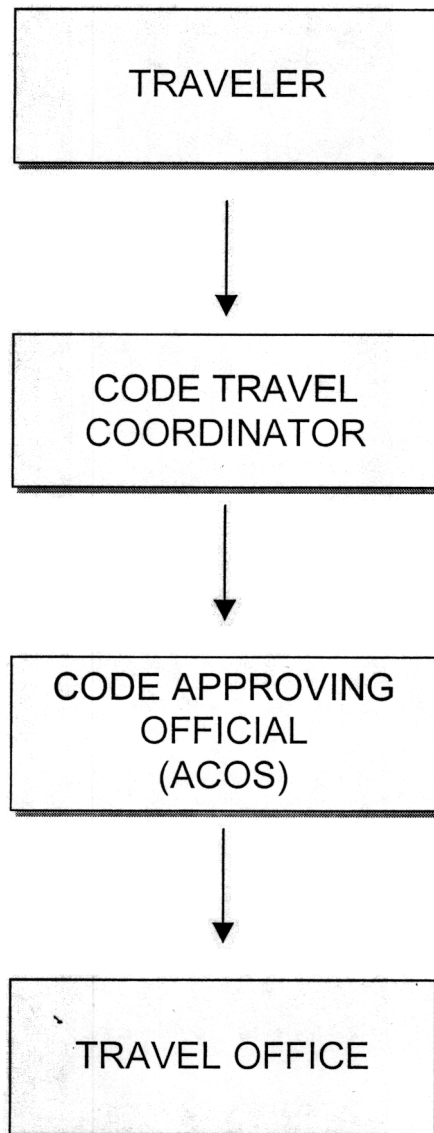
- (a) SATO Phone number: (619) 435-1837
- (b) Web Site: http://www.satotravel.com
- (c) Navy Help Desk: (800) 359-9999 (if already on travel)

f. ALL OTHER TRAVEL INQUIRIES

- (a) PNC(SW) Ron Rodolfo - (619) 545-2746
email: rodolfo.ron@cnap.navy.mil
- (b) Mr. Ed McCoy - (619) 545-2764
email: mccoy.elbert.1@cnap.navy.mil
- (c) Ms. Debbie Jackson - (619) 545-2763
email: jackson.deborah.k@cnap.navy.mil

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SAMPLE OF A TYPICAL TRIP REQUEST ROUTING CHAIN



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SAMPLE TRAVEL CLAIM

TRAVEL VOUCHER OR SUBVOUCHER				Read Privacy Act Statement, Penalty Statement, and Instructions on back before completing form. Use typewriter, ink, or ball point pen. PRESS HARD. DO NOT use pencil. If more space is needed, continue in remarks.							
1. PAYMENT <input checked="" type="checkbox"/> Electronic Fund Transfer (EFT) <input type="checkbox"/> Payment by Check <input checked="" type="checkbox"/> Split Disbursement: Amt to Govt Tr Charge Card \$ <u>All</u>				2. TYPE OF PAYMENT (X as applicable) <input checked="" type="checkbox"/> TDY <input type="checkbox"/> Member Employee <input type="checkbox"/> PCS <input type="checkbox"/> Other <input type="checkbox"/> Dependents <input type="checkbox"/> DLA				3. FOR D.O. USE ONLY a. D.O. VOUCHER NUMBER			
4. NAME (Last, First, Middle Initial) (Print or type) DOE, JOHN				5. GRADE GS-12		6. SSN 111-22-3333		b. SUBVOUCHER NUMBER			
7. ADDRESS, a. NUMBER AND STREET 1234 PENNY LANE				b. CITY SAN DIEGO		c. STATE CA		d. ZIP CODE 92132		c. PAID BY	
8. DAYTIME TELEPHONE NUMBER & AREA CODE (619) 545-2222				9. TRAVEL ORDER NUMBER R5702501TOX2199		10. PREVIOUS GOVERNMENT PAYMENTS/ADVANCES NONE					
11. ORGANIZATION AND STATION COMNAVAIRPAC (CODE N01F)				12. DEPENDENTS (X) (If not complete as applicable) <input type="checkbox"/> ACCOMPANIED <input checked="" type="checkbox"/> UNACCOMPANIED a. NAME (Last, First, Middle Initial) b. RELATIONSHIP c. DATE OF BIRTH OR LAST BIRTHDAY		13. DEPENDENTS' ADDRESS ON RECEIPT OF ORDERS (Include Zip Code) N/A					
						14. HAVE HOUSEHOLD GOODS BEEN SHIPPED (X ONE) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (Explain in Remarks)		d. COMPUTATIONS			
15. ITINERARY											
a. DATE		b. PLACE (Home, Office, Sales Activity, City and State, City and County, etc.)		c. MEANS, MODE OR TRAVEL		d. REASON FOR STOP		e. LODGING COST		f. POC MILES	
9/02	DEP	HOME		PA							
9/02	ARR					AT				20	
9/02	DEP	SAN DIEGO AIRPORT		CP		TD					
9/02	ARR										
9/06	DEP	ORLANDO, FL		CP		AT		240.00			
9/06	ARR										
9/06	DEP	SAN DIEGO AIRPORT		PA		MC				20	
9/06	ARR										
	DEP	HOME									
	ARR										
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	ARR										
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	ARR										
16. SUMMARY OF PAYMENT (1) Per Diem (2) Actual Expense Allowance (3) Mileage (4) Dependent Travel (5) DLA (6) Reimbursable Expense (7) Total (8) Less Advance (9) Amount Owed (10) Amount Due											
18. POC TRAVEL (If one) <input checked="" type="checkbox"/> OWN/OPERATE <input type="checkbox"/> PASSENGER				17. DURATION OF TDY TRAVEL 12 HOURS OR LESS MORE THAN 12 HOURS BUT 24 HOURS OR LESS MORE THAN 24 HOURS							
19. GOVERNMENT/DEDUCTIBLE MEALS a. DATE b. NO. OF MEALS c. DATE d. NO. OF MEALS											
20. CLAIMANT SIGNATURE <u>John Doe</u> b. DATE <u>9/10/01</u> 21. APPROVING OFFICER SIGNATURE <u>[Signature]</u> POC(640) b. DATE <u>9/11/01</u>											
22. ACCOUNTING CLASSIFICATION AA1711804.70CE 000 570252 060957 2D 1X2199 1249R57025YQ											
23. COLLECTION DATA											
24. COMPUTED BY		25. AUDITED BY		26. TRAVEL ORDER POSTED BY		27. RECEIVED (Payee Signature and Date or Check No.)		28. AMOUNT PAID			

DD Form 1351-2, AUG 1997

REVISED EDITIONS OF DD FORM 1351-2 AND 1351-1 MAY BE USED UNTIL SUPPLY IS EXHAUSTED.

Designed using Perform PRO, FedSoft, Apr 98

ONLY the Travel Office
Authorizing Official may
sign this block.

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**BLOCK BY BLOCK INSTRUCTIONS OF
THE TRAVEL VOUCHER DD-1351-2 (Aug 97)**

BLK 1. PAYMENT REQUIRED BY – Place an X on the preferred option box.

BLK 2. TYPE OF PAYMENT - Place an X on boxes that apply to member. If dependent(s) travel is involved, and DLA is claimed, all applicable boxes must be completed.

BLK 3. FOR D.O. USE ONLY – Leave Blank.

BLK 4. NAME - Type or print Last, First and Middle Initial.

BLK 5. GRADE - Type or print Rank/Rate or Grade, CDR, ENS, DKCS, QMC, GM12, GS-9, etc..

BLK 6. SSN - Type or print social security number including dashes.

BLK 7. ADDRESS:

- a. NUMBER & STREET - House or apartment number and street name.
- b. CITY - Spell out name of City or Municipality.
- c. STATE - Two digit state code.
- d. ZIP CODE - Five or nine digit zip code.

BLK 8. AREA CODE AND PHONE – Type or print daytime phone number including area code.

BLK 9. TRAVEL ORDER NUMBER - Type or print TANGO number.

BLK 10. PREVIOUS GOVERNMENT PAYMENTS/ADVANCES – Print or type any previous travel payments and/or advances excluding ATM Withdrawals.

BLK 11. ORGANIZATION OR STATION - Type or print command currently attached; COMNAVAIRPAC or CNAP, and Office Code; N01F.

BLK 12. DEPENDENT(S) – Complete as applicable. THIS BLOCK IS NORMALLY LEFT BLANK ON TDY/TAD TRAVELS.

BLK 13. DEPENDENTS' ADDRESS – Leave Blank for TDY/TAD travel.

BLK 14. HAVE HOUSEHOLD GOODS BEEN SHIPPED – Place an X in the appropriate box.

BLK 15. ITINERARY:

- a. DATE - Indicate current year, then date of departure or arrival on each block, in month and day i.e., 2/1, 11/20. etc..
- b. PLACE - Indicate place, command, city, base, activity, or airport the traveler made a stop, report for duty or perform a mission.
- c. MEANS/MODE OF TRAVEL - See two digit codes on reverse.
- d. REASON FOR STOP - See two digit codes on reverse.
- e. LODGING COST - Indicate the hotel/motel, BEQ or BOQ cost in U.S. currency excluding any occupancy tax.
- f. POC MILES - Indicate one way mileage. Example: From home to airport, Base to airport or place of departure or travel from airport to home.

BLK 16. POV TRAVEL - Indicate whether an owner/operator or a passenger on a POV.

Enclosure (2)

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BLK 17. TRAVEL DURATION – Place an X in the appropriate box.

BLK 18. REIMBURSABLE EXPENSES (more spaces are now allocated.) - Print or type all items of reimbursable expenses. i.e. Lodging/Hotel State Tax, Rental Car, Conference Fees (indicate whether meals are included), Registration Fees, Bridge Tolls, Gas, Ferry Fees, Taxi Expense, Exam Fees, etc. Tips and Porter fees must be itemized, showing actual cost and number of bags.

BLK 19. GOVERNMENT/DEDUCTIBLE MEALS – Enter meals consumed when furnished with or without charge incident to an official travel by sources other than government mess. Meals furnished on commercial aircraft or private individuals are not considered deductible meals.

BLK 20.

- a. CLAIMANTS SIGNATURE - Signature of traveler.
- b. DATE - Date member sign the claim.

BLK 21.

- a. APPROVING OFFICER SIGNATURE - Signature of command representative authorized to obligate funds.
- b. DATE - Date approved.

BLK 23. ACCOUNTING CLASSIFICATION – Enter entire Line of Accounting (separated by spaces) as shown on the travel orders.